## FEC FORM 3

4020353760

FE5AN018

# REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED SENATE

For An Authorized Committee

Office Use Brily HAY 12 FM 1:55

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typ over the lines.	e 12FE4M5	
<u>C</u>	O, M, M, I, T, T, E, E,	T,O, ,EL,EC,T,	PAVID B WA	$F_1M_1S_1L_1E_1Y_1$	
ADI □	Check if different than previously reported. (ACC)	3,9, GREE.	NBRIER AVE	FU <sub>1</sub> V   26	1.8.71-
2.	FEC IDENTIFICATION N	57 3.	CITY A  IS THIS NEW (N) OF	STATE AMENDED (A)	ZIP CODE A STATE ▼ DISTRICT
4.	TYPE OF REPORT (Cr (a) Quarterly Reports:  April 15 Quarterly	Report (Q1)	2-Day PRE-Election Report for Primary (12P)  Convention (12C)	the:  General (12G)  Special (12S)	Runoff (12R)
	July 15 Quarterly F October 15 Quarter January 31 Year-Ei	erly Report (Q3)	Election on Election Report fo	3 / <u>2014</u>	in the State of
	Termination Report	: (TER)	General (30G)  Election on	Runoff (30R)	Special (30S) in the State of
5.	Covering Period O	<u>"</u> 'b"'\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"	through	84 23 4	<u>o_i_y</u>
	ertify that I have examined the		est of my knowledge and belief R. Wamsley	it is true, correct and con	nplete.
	nature of Treasurer	Frende R.	Warsley	Date O	38 (2014)
NO	Office Use Only	leous, or incomplete infor	mation may subject the person si	F	EC FORM 3 (Revised 02/2003)

Toll Free 800-424-9530

Local 202-694-1100

**SUMMARY PAGE** 

FE5AN018

FE5AN018

# 4020353763

#### **DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17	. OPERATING EXPENDITURES	<u></u>	3,2,1,4,8,4
18	. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	000
19	LOAN REPAYMENTS:     (a) Of Loans Made or Guaranteed     by the Candidate		
	(b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))		
20	. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li><li>(such as PACs)</li></ul>		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	[	0.00
21.	OTHER DISBURSEMENTS		1,7,4,0,0,0
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	535.00	495484
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	7,8,8,1,6
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	290000
25.	SUBTOTAL (add Line 23 and Line 24)		3,698.16
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	π Line 22)	53500
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)	PERIOD	3,1,6,3,1,6

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### SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 11d **Detailed Summary Page** 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) to Elect David B. Wamsley Full Name (Last, First, Middle\_Initial) Wamsley Candidat David Date of Receipt Mailing Address State Zip Code WV 26187 FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Self-em Schoo Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Candidate Wamsley )avd Date of Receipt Mailing Address State Zip Code Williams 76187 FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation School Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing federal political committee. Amount of Each Receipt this Period Name of Employer Occupation Receipt For: Election Cycle-to-Date **Primary** General Other (specify) SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF	
ITEMIZED DISBURSEMENTS	for each category of the	(check only one)	
	Detailed Summary Page	17   18   19a   19b 20a   20b   20c   21	
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an	person for the purpose of soliciting contributions tee to solicit contributions from such committee		
NAME OF COMMITTEE (In Full)		Control Control	
(ommittee to Elect Do	wid B. Warister		
Full Name (Last, First, Middle Initial)	1		
A. Fern Wood Computer S	Pervices	Date of Disbursement	
Mailing Address Box 80%		04/02/2019	
City Belove OH	Zip Code 457/4	Amount of Each Disbursement this Period	
Purpose of Disbursement	<u> </u>	50000	
Website Maintenance	00.1		
David B. Wamsley	Category	7	
Office Sought: House Disbursement F	or:	_	
Senate Prima	·		
State: WV District: Other	(specify)		
Full Name (Last, First, Middle Initial)			
В.		Date of Disbursement	
Mailing Address		M,W \ [0,0] \ [1,1,1,1,1]	
City State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Amount of Each Dispulsement this Period	
i dipose di Disbursement			
Candidate Name	Category/ Type		
Office Sought: House Disbursement Fo			
Senate Primar President Other	y General (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			
С.		Date of Disbursement	
Mailing Address		M,W \ D \ D \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
City State 2	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			
Candidate Name			
Category/			
Office Sought: House Disbursement Fo	···		
Senate Priman President Other	y General (specify)		
State: District:	-r		
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			

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SCHEDULE C (FEC Form 3)		PAGE OF
- /	Use separate schedule(s)	FOR LINE NUMBER:
LOANS	for each category of the Detailed Summary Page	(check only one)13a
	- Johanna Garrinary Fago	
NAME OF COMMITTEE (In Full)  OM MIHEE + Elect David  LOAN SOURCE Full Name (Last First Middle Initial)	1 B/1200/2	
LOAN SOURCE Full Name (Last, First, Middle Initial)	1 15. Wansver	
LOAN GOORGE Tulk Name (Last, First, Middle Millar)	<del>⊈</del> le	ction:
		Primary
Mailing Address		General Character
		Other (specify) ▼
City State ZIP Co	de	
Original Amount of Loan Cumulative Payment To	Date Balance	Outstanding at Close of This Period
		Dutatanioning at Close of This Period
		<u> </u>
TERMS Date Incurred Date Due	Interest Rate	01
M,M, Lond, Lond, M,M, Lond, Lo	THE ST NAME	Secured:
List All Endorsers or Guarantors (if any) to Loan Source	·	Yes No
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Walling Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Outstanding:	<u></u>
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount (	
City State ZIP Code	Guaranteed	
	Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	<u></u>
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	O	
, walling / ladiess	Occupation	
City State ZIP Code	Amount	
City State ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)	<b>&gt;</b>	
TOTALS This Period (last page in this line only)		<u> </u>
	<u> </u>	<u> </u>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If n	o Schedule D, carry forward to	appropriate line of Summary.

# SCHEDULE C-1 (FEC Form 3) (NON-C) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedul

Federal Election Commission, Washington, D.C. 20463			
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBE			
Committee to Elect D			
LENDING INSTITUTION (LENDER)	Amount of Loan Interest Rate (APR)		
Full Name	<u></u>		
Mailing Address	Date Incurred or Established		
City State Zip Code	Date Due		
A. Has loan been restructured? No Yes	If yes, date originally incurred		
B. If line of credit,  Amount of this Draw:	Total Outstanding Balance:		
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors must	ed? / st be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers		
No Yes If yes, specify:	Does the lender have a perfected security interest in it? No Yes		
E. Are any future contributions or future receipts of intere- collateral for the loan? No Yes If yes, sp	st income, pledged as		
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
Date account established:	Address:		
M'M, D'D, YYYYY	City, State, Zip:		
F. If neither of the types of collateral described above wa exceed the loan amount, state the basis upon which the	is pledged for this loan, or if the amount pledged does not equal or his loan was made and the basis on which it assures repayment.		
G. COMMITTEE TREASURER	DATE		
Typed Name Signature			
H. Attach a signed copy of the loan agreement.			
TO BE SIGNED BY THE LENDING INSTITUTION:     To the best of this institution's knowledge, the ten are accurate as stated above.	ms of the loan and other information regarding the extension of the loan		
I suring extensions of cledit to offiel bottowers of the	loan must be made on a basis which assures resourced and be-		
AUTHORIZED REPRESENTATIVE	DATE		
Typed Name			
Signature Title			

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SCHEDULE D (FEC Form 3)	(Use separate PAGE OF
DEBTS AND OBLIGATIONS (NONE)	schedule(s) FOR LINE NUMBER:
Excluding Loans	for each (check only one) 9 numbered line) 10
NAME OF COMMITTEE (In Full)	
Committee to Elect David B. 1	Vangley
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	<del></del>
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment This Period	Outstanding Release at Olega of This Burns
- I SAME TO SA	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	<del></del>
City State Zip Code	
City State Zip Code	
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment This Period	Outotonding Palance at Other ( 77 )
Taymont mar and	Outstanding Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)	► Lagran
2) TOTALS This Period (last page this line number only)	•
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page or	nly) •

Part # 156297-435 HI 11/UD 2051 pc-us 14 **INSPEC** FRI – 09 MAY 10:31 PRIORITY OVERNIGI SHIP DATE: OBTA ACTWGT: 0.2 LB CAD: /POSISO1 DIMS: 0x0x0 IN BILL SENDER OFFICE OF PUBLIC RECORDS 232 HART SENATE OFFICE BLDG United States Senate 1.800.463.3339 O SECRETARY OF THE SENATE Post Office **944** WASHINGTON DC 20510 Dry Ice Organization 1945 (100) EP YKNA 17K# 8032 4750 5526 UNITED STATES US ORIGIN ID:PKBA O pure granns. 1 ding and D 5 Packaging \* Declared value Express Package Servi No As per estaction NOTE: Service order has changed. PedEx Standard Overnight ... signatura for delivery. Addex First Overnight
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DANA K MECALLUM FUTERINTEINDENT

HAR HATE DIFFICE BUILDIN SUITE 232 WAEHINGTON, DC 20510-71 PROME [202] 224-0322

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OFFICE OF PUBLIC RECORDS

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FAXDate of Receipt
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PREPARER DH DATE PREPARED 5-12-14



